

**Policy for**  
Supporting Pupils with Medical Conditions

|   |                                |     |
|---|--------------------------------|-----|
| 1 | Rationale                      | p.2 |
| 2 | Aims                           | p.2 |
| 3 | Organisation and resources     | p.3 |
| 4 | Inclusion                      | p.3 |
| 5 | Roles and responsibilities     | p.3 |
| 6 | Training                       | p.4 |
| 7 | Health Care Plans              | p.4 |
| 8 | School Visits                  | p.5 |
| 9 | Links to other school policies | p.5 |
|   | Appendices                     | p.6 |

|                                 |                        |
|---------------------------------|------------------------|
| <b>Governor Responsibility:</b> | Learning and Community |
| <b>Staff Responsibility:</b>    | M Moss & L Robson      |
| <b>Review Period:</b>           | Annual                 |
| <b>Status:</b>                  | Statutory              |
| <b>Reviewed:</b>                | Summer 2023            |
| <b>Next Review Date:</b>        | Summer 2024            |
| <b>Governor Signature</b>       |                        |

**This policy stays in place until reviewed**

## Rationale

Children at school with medical conditions should be properly supported so that they can play an active part in school, remaining healthy and able to achieve their academic potential, with full access to education, including school visits and physical education.

The Health and Safety at Work Act 1974 makes employers responsible for the health and safety of employees and anyone else on the premises. In the case of pupils with special medical needs, the responsibility of the employer is to make sure that safety measures cover the needs of all pupils at the school. This may mean making special arrangements for particular pupils who may be more at risk than their classmates. Individual procedures may be required. The employer is responsible for making sure that relevant staff know about and are, if necessary, trained to provide any additional support these pupils may need.

The Children and Families Act 2014, from September 2014, places a duty on schools to make arrangements for children with medical conditions. **Pupils with special medical needs have the same right of admission to school as other children and cannot be refused admission or excluded from school on medical grounds alone.** However, teachers and other school staff in charge of pupils may need to take swift action in an emergency. This duty also extends to teachers leading activities taking place off the school site. This could extend to a need to administer medicine.

**The prime responsibility for a child's health lies with the parent who is responsible for the child's medication and should supply the school with current information.**

The school takes advice and guidance from the "Supporting pupils at school with Medical Conditions: Statutory guidance December 2015" (DfE) which encourages self-administration of medication when possible." Please refer to the school's Asthma Policy for supporting children with asthma.

The **School Nurse** is from Whittington Health NHS Trust and is based in Hornsey Central Neighbourhood Health Centre 020 3074 2400.

## Aims

"A medical condition that is long term with acute episodes, requires ongoing support, and involves the need for medication and/or care whilst at school. The condition will need monitoring and could require immediate intervention in emergency circumstances." Some children with medical conditions may be disabled and some may also have special educational needs and may have a statement, or Education, Health and Care Plan (EHCP) which brings together health and social care needs, as well as their special educational provision. For children with Special Educational Needs and Disability (SEND), this guidance should be read in conjunction with the SEND code of practice and the school's Local Offer.

Parents of children with medical conditions are often concerned that their child's health will deteriorate when they attend school. This is because pupils with long-term and complex medical conditions may require on-going support, medicines or care while at school to help them manage their condition and keep them well. Others may require monitoring and interventions in emergency circumstances. It is also the case that children's health needs may change over time, in ways that cannot always be predicted, sometimes resulting in extended absences.

We aim to:

- Help parents to feel confident that we will provide effective support for their child's medical condition and that they feel safe.
- Develop strong, positive relationships to support decisions made about the support their child needs and what we can provide and listen to and value the views of parents and pupils.
- Ensure access to a fully inclusive education.
- Establish relationships with relevant local health services to help staff, children and their parents where there is a need.

- To monitor and keep appropriate records.

Teachers and support staff are not required to administer medication or to support pupils with medical needs as part of their employment contract but they may volunteer to do so. All staff may wish to discuss this with their particular Teacher Association and County Council regarding their indemnity policy. In some cases the contracts for non-teaching staff or special support assistants may include references to the administration of medication and/or the undertaking of medical procedures. Such contracts will of course be agreed on an individual basis.

### Organisation and resources

Children's medicines are managed by the Parent and Pupil Link and Teaching Assistants (TAs). Medicines and first aid equipment is stored and accessible to staff in the Medical Room on the Yellow Floor. Some support staff, which are TAs and SMSAs (school meals supervisor assistant) and the PE co-ordinator and office staff are First Aid and paediatric first aid trained. Please note, in case of an emergency it is not essential for the person administering first aid to be first aid trained.

The School Business Manager manages the work of the Parent and Pupil Link and works in partnership with staff and parents to ensure provision is well managed in order to meet the needs of the child.

### Inclusion

We will ensure that every child identified with a medical condition is encouraged to make an active and full contribution to their learning. Guidance from parents and carers will be important in determining how well these children can participate. All members of the school staff will be informed of a child's medical condition on a need-to-know basis. This information is stored in the medical room and in the class inclusion folder. Children will be carefully and sensitively monitored during activities that form part of the normal timetable including P.E., school visits, playtimes and lunchtimes. Where possible children may attend extra-curricular activities (outside school hours). Clubs have access to the school medical room and to the children's medicine and Health Care Plans. **It is the parent's responsibility to inform extra-curricular clubs of any medical needs.**

Where children with long-term medical conditions find it difficult to attend school, absence will be marked accordingly. If a child is going to be absent from school, for medical reasons, for more than 15 days (not necessarily consecutive days) the school in conjunction with the parents will fill in a medical CAF form which may result in Home Tuition.

Parents and/or health professionals will inform class teachers of the child's condition. When necessary, the school will work in conjunction with Haringey Home Tuition Services in identify ways of involving the child with their learning in the home or hospital environment. This can include video conferencing, separate project based work or simply sending work home via friends and family.

When children have persistent health concerns with attendance below 90% the school may refer to the school nurse and Education Welfare Officer (EWO)

### Roles & Responsibilities

The Governing body ensures:

- That arrangements are in place in school to support students with medical conditions. In doing so, they should ensure that such children can access and enjoy the same opportunities at school as any other child.
- That staff liaise with health and social care professionals, children and parents to ensure that those with medical conditions are effectively supported. The needs of each individual child must be considered and how their medical condition impacts on their school life.

- That the arrangements school puts in place are sufficient to meet their statutory responsibilities and should ensure that policies, plans, procedures and systems are properly and effectively implemented. This aligns with their wider safeguarding duties.

The School Business Manager ensures:

- That the school's policy covers the role of individual healthcare plans and meets the educational needs of individuals.
- Policy is reviewed annually.
- This existing policy stays in place until reviewed.

The Parent and Pupil Link ensures:

- That parents provide the school with sufficient and up-to-date information about their child's medical needs.
- That Health Care Plans (HCPs) are completed and clearly written in conjunction with the parents to be implemented in time of need – See Medical Conditions and Health Care Plans below.
- The medical Information in school is accurate (diagnosed by GP, consultant) and up to date and distributed to relevant members of the staff and in relevant locations e.g. medical room
- Liaison between school nurse that annual training for all staff is organised e.g. AAI pen training, epilepsy awareness training, asthma awareness training so that all staff know how to respond in a medical emergency
- Ensures that staff inform parents/carers when prescribed medication has been administered – in accordance with the HCP-

### Illness and Ad Hoc Medication

Parents/ Carers are responsible for:

- Keeping their children at home if acutely unwell or infectious (to return to school 48 hours after last bout of diarrhoea and/or sickness; excluded from swimming for 2 weeks).
- Referring to the school website for guidance and the following NHS link: [Is my child too ill for school? - NHS \(www.nhs.uk\)](https://www.nhs.uk/conditions/when-to-see-a-doctor/when-to-see-a-doctor-when-to-see-a-doctor):
- Any prescribed medication required for the child during the school day (i.e. an ad hoc course of antibiotics) must be handed to school office with the appropriate document completed and signed by the parent/ carer. This form is link is available on the school website: "Parental Consent Form for Administering Medicine".
- All medication on school premises must be clearly labelled with the following information:
  - In a labelled container as originally dispensed by the pharmacy
  - Pupil's Name
  - Name of medication
  - Dosage
  - Frequency of administration
  - Storage requirements (if important)

**Please note: over the counter, non-prescribed medication will not be administered by the school (only prescribed or crisis management medication, upon instructions from a doctor).**

- Parents must make their own arrangements to come to the school to administer non prescribed medication.

***Pupils are not permitted to carry medication (with the exception of inhalers for asthma control, but this must be specified in the Health Care Plan and medication identified in the Health Care Plan; please refer to the schools' Asthma Policy for further guidance). No pupil is permitted to have any non-prescription drugs in school;*** this is to ensure that no pupil unwittingly or otherwise gives another pupil his or her medication. This approach is supported in school through our PSHE curriculum.

## Medical Conditions and Health Care Plans

A Healthcare Plan (HCP) is a record of a child's long-term and/or complex medical condition or the support needed to manage a disability or health condition which may require on-going support. The HCP is available from the school office. The HCP is written by the parent/carer and is agreed with the child's parent/ carer and Parent and Pupil Link. Health care Plans are also maintained by Local Authorities for looked after children – in this instance the Health Care Plan will contain a Personal Education Plan in addition to the health and social care elements.

An HCP includes:

1. Personal data and emergency contacts
2. Medical diagnosis
3. Symptoms
4. Emergency procedures and actions
5. Daily care (if necessary)
6. Medication and medication needs (if necessary)
7. Special requirements e.g. dietary needs
8. A recent (not older than a year) photo

A copy is kept by parents/carers and a further three copies of the HCP are distributed in school; copy one is kept in the child's medical box with their medication; copy two is in the HCP folder in the medical room; copy three is in the inclusion folder in the class. An pupil summary page is kept on the wall in the Medical room. This includes a photo, the name of the child, date of birth, condition, medicine and dosage requirements. This is so staff have immediate access to relevant information in a medical emergency. The room is locked unless used for first aid needs across the school.

### Organisation and access to a child's medication and medical information:

A copy of a child's HCP is placed in each Class 'Inclusion Folder' and the medical room. Medication is stored in a medical box for each year group with the copy of the child's individual HCP. An overview of all HCPs is available to staff in the medical room. This list indicates child's name, class, condition and medication.

Permission is given to children in Y5 and Y6, with adult guidance to self-administer i.e. normally those managing asthma, if required. Spare medication will be stored in the child's classroom on a shelf and a responsible adult will assist the child and log the dose taken. For children in Y4 and below who require immediate access to medication spare medication will be stored in the classroom, on a shelf and an adult will assist the child in accordance with instructions in the child's HCP or carry out emergency response.

A log is kept with each child's medication and whenever medication is administered this is completed by the responsible adult assisting the child and the parent/ carer is informed.

### Parents/ Carers responsibilities (in relation to medical conditions and HCPs):

- If a child needs medication or regular support due to a medical condition the parent must complete a Health Care Plan (HCP) before their child starts school or if a new diagnosis has been made within the school year.
- They update HCPs and the medical information if there is a change and to provide medical evidence, where required within two weeks of a change.
- To provide current medical information which must be backed up by medical documentation if requested.
- That they provide the Parent and Pupil Link a HCP with comprehensive information regarding their child's condition and medication and up to date contact information so that they, or an identified responsible adult, are contactable at all times.

- The HCP must be typed, in word format, include a recent photo and emailed to the school. Either an email signature can be inserted or a hard copy is printed and signed.
- They provide the school with medication related to their medical condition that must be prescribed and in date with the original prescription label on the medication. NOTE: the school is not allowed to administer out of date medication.
- They make a note of the amount of medication they provided school with, expiry date of the medication
- They are responsible for renewing the medication when supplies are running low and/ or before the expiry date.
- Note, the exception to parents monitoring the expiry date is for children with medication for asthma on site. In this case it is the school's responsibility to inform parents / carers that the medication is expiring so parents/ carers can provide new medication (please refer to the school Asthma Policy)
- A List '99 Check is carried out (via the school office accessing the Single Central Record) should parents/ carers require regular access to the Medical Room. If this is the case, parents will also be asked to sign the school's code of conduct. See Appendix 1.
- The school is not liable for failure to manage the medical condition of the child in school if they have requested up to date documentation and in date medication in the case where this has not been provided.
- Failure to comply with the above points will result in your child being kept off school until a signed HCP and medication is held in school.

#### HCP renewal process

- Transition into a new academic year requires all current HCPs to be reviewed by parents/ carers in preparation of the following school year.
- A general reminder will be sent towards the end of the summer term to advise parents to check and amend their HCP if there are any changes.
- If there are no changes to the current HCP they do not need to return a copy.
- If there are changes to the HCP, they amend the HCP, with the current date an updated photograph and email it to the office for the attention of the Parent and Pupil Link.
- There will be a two week 'grace' period to allow for the school to review the HCP returned.
- The school is not liable for failure to manage the medical condition of the child in school if they have requested up to date HCP documentation and this has not been provided or if there have been changes in the HCP and these have not been provided.

#### Medicines on site during holidays and school closures:

- Emergency medical supplies will remain stored in the medical room under the Health and Safety Policy.
- During school holidays and at the end of the academic year the school is locked.
- If you require your child's medication over the holiday period it is your responsibility to collect the medication before school closes for the breaks and to return it the day your child commences school again.
- Once the school is closed for holiday there is no access to the medical room to collect medication.

When school commences in September, current medication (prescribed) must be brought in **on the child's 1<sup>st</sup> day back.**

- If there have been any changes to the HCP over the holiday then parents/ carers email the school office and these will be discussed on a case by case basis at the start of the new term.

**NOTE: If your HCP is not completed in with current, prescribed medication then the school reserves the right to request your child is kept off school until the HCP and medication is in school.**

## Training

All staff will ensure they are aware of the protocols and procedures for specific pupils in school through attending training provided and reading care plans devised for individual pupils. Copies of HCPs are kept in class inclusion folders, so class teachers and teaching assistants are aware of specific needs.

General training on awareness of medical conditions and their possible medication implications will occur annually e.g. asthma, allergies. This will run in addition to the school's first aid training, which will continue to be under the guidance of the Health and Safety Policy.

Training regarding specific conditions (e.g., diabetes, epilepsy) will be delivered as required and may be dependent on access to specialist nurses or courses available. This is usually within the term of a new pupil beginning school but/ or in the case of a new diagnosis for a current child, this is necessary before they commence or restart their education at Tetherdown School. The school nurse offers two-way support for school.

First aid training is delivered on a voluntary basis. Dedicated support staff, teacher assistants and school meal supervisors (SMSAs) have an initial two-day First Aid at Work training course. This is refreshed every 2 years. Dedicated staff in contact with Reception children receive an additional half-day paediatric first aid training course. This process is seen by the School Business Manager and the Parent and Pupil Link.

In the case of absence, class cover is provided by internal staff or external, vetted supply teachers. These staff will be briefed by a member of SLT and will have access to the individual HCPs in the class inclusion folder and the overview and medical information in the school medical room.

The Headteacher ensures:

- That the correct level of insurance is in place and appropriately reflects the level of risk, with risk assessment being carried, when appropriate.

## School Visits

When preparing risk assessments staff will consider any reasonable adjustments they might make to enable a child with medical needs to participate fully and safely on visits. Additional safety measures may need to be taken for outside visits and it may be that an additional staff member, a parent/carer or other volunteer might be required to accompany a particular child. Arrangements for carrying and administering any medicines will need to be planned as part of the risk assessment and visit planning process. A copy of the HCP and medication is taken on trips and visits in the event of an emergency. This information must be handled sensitively and in line with our GDP policy

## Recruitment of staff to support children with medical needs.

Very occasionally having met with parents to discuss the needs of their child, the school will decide to recruit a suitable person to provide appropriate support, e.g. to ensure the administration of insulin for those children diagnosed with Type 1 diabetes.

Staff in school will be approached in the first instance, to consider the identified position, its level of responsibility and any training needs. Staff are not expected to provide such support without consultation and the school cannot designate a member of staff to be responsible for the medical needs

of a child should they not wish to. Therefore, we follow the guidelines within our recruitment policy for recruiting staff to such a position:

To obtain expression of interest among the staff team:

- An internal advert published to all staff within 5 working days of the initial meeting with parents. Closing date 5 working days from publication.

Should there be no expression of interest:

- External advert published to all local advertising sources (as appropriate) within 5 working days of the above closing date.
- New closing date 10 working days from publication.
- Shortlisting and interviews within 5 working days of the closing date.
- Start date identified as “as soon as possible”. However, candidates employed elsewhere may well be required to give at least 1 month’s notice.
- On appointment: new member of staff will require 1 day induction before commencing duties.
- Confirmation of contract for the new employee is subject to two satisfactory references, appropriate checks (including DBS, List ’99, satisfactory medical check, right to work in the UK, qualifications, etc.) If for any reason the school is not satisfied that the member of staff is safe to work with children the contract may be terminated.

All timelines are approximate depending on circumstances which may be beyond our control.

This policy should be read in accordance with the following policies:

Health & Safety Policy

Asthma Policy

Data protection

Policy for intimate care

Equal opportunities policy

Disabilities and Equal Access (DEA) Policy

Safer Recruitment Policy

Supporting pupils at school with medical conditions: Statutory guidance for governing bodies of maintained schools and proprietors of academies in England (DfE September 2014).

Link on school website: <http://www.nhs.uk/Livewell/Yourchildatschool/Pages/Illness.aspx>



## Appendix 1

### Parent/ Carer Access to Medical Room: code of conduct

I undertake to support the school's approach to the management of sensitive information and recognise the need for confidentiality whilst working in the medical room with my child. I agree to follow the protocols outlined below:

- I am aware that some information about children is displayed on the wall for swift access by staff dealing with children in a medical emergency. I will not share any child's medical information with another adult.
- I understand that the medical room door should not be closed when I am inside whilst being mindful of the need for privacy.
- Should there be a medical emergency whilst I am using the medical room I will do my best to vacate the area as quickly as possible.
- I will not attempt to deal with a private situation involving other children or adults.
- I will respect the protocols advised to me whilst administering medication and will leave the medical room in a fit and tidy state for other users.
- After administering my child's usual medicine I will return it to its correct place.
- If I have any queries I will make contact with my designated liaison member of staff as soon as possible.

Thank you for your co-operation.

Child's name ..... in ..... class

Parent/ Carer Full name .....

Signed ..... Date .....